



BRINGING CIVIL SOCIETY TOGETHER
TO END THE TUBERCULOSIS EPIDEMIC

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To: Vytenis Andriukaitis, European Commissioner for Health and Food Security

Cc: Xavier Prats Monné, Director-General for Health and Food Safety
John F. Ryan, Director Public Health, DG Health and Food Security

Brussels, 21 March 2018

Dear Commissioner Andriukaitis,

Subject: Attendance to the UN High Level Meeting on Tuberculosis

In view of upcoming World Tuberculosis (TB) Day on March 24, the [TB Europe Coalition](http://www.tbcoalition.eu), supported by **34** civil society and community organisations (undersigned), **would urge you to make a public statement on tuberculosis on World TB Day, encouraging EU member states to attend the first ever UN High Level Meeting on TB.**

This important event, themed *“United to End Tuberculosis: An Urgent Global Response to a Global Epidemic”*, will take place **on 26 September 2018** at the UN Headquarters in New York, the day after the opening of the UN General Assembly. The scope of the event, agreed by UN Member States, sets an expectation that participation should be at the highest level, as this is a critical moment in the fight against TB both worldwide and in the European region. However, the required level of participation is not guaranteed.

Despite decreasing trends in TB incidence and mortality rates, the region of **Eastern Europe and Central Asia (EECA) continues to remain home to the highest rates of multi-drug resistant TB (MDR-TB)**¹. In many countries of the European region, rates of MDR-TB are alarming and EECA has the world’s highest rates of new TB patients with MDR-TB². Many of the MDR-TB high priority countries are EU Member States: Bulgaria, Estonia, Lithuania, Latvia and Romania³. In addition to the catastrophic human cost, the economic burden caused by TB in the region is enormous. It is estimated that by 2050, drug resistant TB will be responsible for an additional **2.1 million deaths** at an **economic cost of \$1.1 trillion** in Europe⁴.

The TB crisis in the EU is not only an economic problem. It is also an example of inadequate protection of human rights, especially the right to health, as guaranteed in several legally binding documents, such as the EU Charter of Fundamental Rights (Art. 35) and the International Covenant

¹ MDR-TB is a form of the disease that does not respond to the standard treatment of TB drugs and is much more difficult and costly to treat. The resistant strains of TB are difficult to cure with the traditional TB antibiotics. Only limited new medicines options are available for treating MDR-TB and those have strong adverse effect with expensive daily treatment which takes up to two years.

² Global Tuberculosis Report 2013, World Health Organisation, http://www.who.int/tb/publications/global_report/en/

³ The 18 high-priority countries of the Eastern Europe and Central Asia region are: Armenia, Azerbaijan, Belarus, Bulgaria, Estonia, Georgia, Kazakhstan, Kyrgyzstan, Latvia, Lithuania, Moldova, Romania, Russia, Tajikistan, Turkey, Turkmenistan, Ukraine and Uzbekistan. Source: <http://www.euro.who.int/en/health-topics/communicable-diseases/tuberculosis/data-and-statistics>

⁴ Review on Anti-Microbial Resistance, May 2016, Jim O’Neill



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on Economic, Social, and Cultural Rights (ICESCR) (Art. 12). All EU states are signatories to the ICESCR which lists as a core obligation the provision of medicines on the WHO's Essential Medicines List⁵ and guarantees accessibility of health technologies, such as diagnosis and treatment without discrimination. However, it is well-documented that not all people with TB in the EU enjoy these rights. Therefore, **we urge you to reaffirm the EU's commitment to the right to health and prioritise the elimination of TB.**

This is an appalling situation for the European region, which, compared to many other regions in the world, has much higher living standards and a more stable political, economic and social situation, and thus should be better positioned to fight this disease. **It is in the EU's best interest to prevent TB epidemics from crippling Europe's social and economic development. We urge you to attend the UN HLM and invite EU member states to attend the event at the highest level.**

We, as civil society and community representatives, are at your disposal for any kind of support with the EU delegation's engagement and attendance of the UN HLM on TB. More specifically, it is first of all important to **make sure that the UN HLM political declaration on TB is action oriented** on both themes of the conference: 1) accelerating a comprehensive response through access to affordable prevention, diagnosis and treatment and care, and 2) scaling up sufficient and sustainable national and international financing and implementation for service delivery, innovation, and R&D. Secondly, it is vital to **ensure that there are concrete accountability mechanisms in place** to guarantee that the commitments made in the political declaration of the HLM become a reality.

We would also urge you to **push for maximum participation of civil society and TB affected communities in the process, including a UN HLM Civil Society Hearing in New York before the HLM in September**, and to ensure civil society voices are heard at every level throughout the processes. Civil society and communities play a tremendously important role in ending TB, starting from TB prevention, active finding of people with TB who are missed by official healthcare arrangements, and treatment support which helps a patient to adhere to the treatment. Therefore, their engagement in the TB response is vital as they are closer to and more trusted by communities affected by TB, and are more aware of the problems and barriers on the way to an effective TB response.

We remain at your disposal to meet with you and your team to discuss these and other points in more detail.

We believe that together we will be able to generate the much-needed regional political leadership and action to achieve the goal of ending TB.

Yours sincerely,

ABRAÇO (Portugal)

A FEW International

Alliance for Public Health (Ukraine)

⁵ This list contains all medicines approved for treating TB, including new and repurposed drugs which many in the EU still lack access to.



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Association HIV.LV (Latvia)
Association of Kyrgyz Coalition against TB (Kyrgyzstan)
CISE (Malawi)
DSW (Deutsche Stiftung Weltbevoelkerung)
Eurasian Key Populations Health Network
European AIDS Treatment Group
European Liver Patients' Association-ELPA
For Impacts in Social Health (Cameroon)
IMPACT TB, National network of TB people in India (India)
International Committee on the Rights of Sex Workers in Europe
Jointed Hands Zimbabwe Advocacy Core Team (Zimbabwe)
Labor and Health Social Initiatives, NGO (Ukraine)
LHL International Tuberculosis Foundation (Norway)
Life Quality Improvement Organisation FLIGHT (Croatia)
NGO "INTILISH" (Uzbekistan)
Public Association "The Support of people living with HIV "KUAT" (Kazakhstan)
Public Foundation "Answer" (Kazakhstan)
Public fund "Sanat alemi" (Kazakhstan)
Public Movement "The Ukrainians against Tuberculosis" Foundation (Ukraine)
All-Ukrainian association of people who recover from tuberculosis «Stronger then TB» (Ukraine)
International association of journalists "Health Without Borders" (Ukraine)
"Stop TB Together" Coalition of Organisations (Ukraine)
TBpeople
RESULTS Korea
RESULTS UK (UK)
Roma Foundation "Iskra"(Bulgaria)
Stop TB Partnership (Kenya)
TB Europe Coalition
TB Proof (South Africa)
Tendo's world: Arts & health (Uganda)
Ukrainian Network of People who Use Drugs (PUD.UA/ VOLNA) (Ukraine)
VRSolutions LLC (Azerbaijan)

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